

2007 D-41 SUB Fiduciary Income Tax Return



OFFICIAL USE ONLY

Leave the lines blank that do not apply.

Fiduciary information section including tax year beginning (MMYY), type of entity (Estate, Simple trust, Complex trust), and estate or trust name.

Fiduciary's name and title section.

Fiduciary's address section.

City, State, and Zip Code section.

Additional trust and estate information section including date created and date of deceased's death.

Name of grantor and address of grantor section.

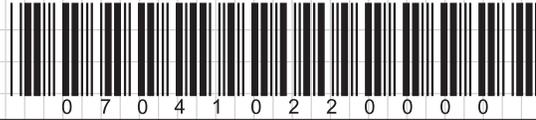
City, State, and Zip Code section.

Complete federal Form 1041 before continuing

Income Round cents to the nearest dollar. If the amount is zero, leave the line blank.

Table with 12 rows for income and deductions, including Total income, Additions, Subtractions, Total DC fiduciary income, Deductions and exemptions, and Taxable fiduciary income.

Enter your last name ABCDEFGHIJKLABCDEFGH
Your SSN or FEIN 123456789



Tax and payments Round cents to the nearest dollar. If amount is zero, leave the line blank.

Tax calculation If Line 12 is a loss, go directly to Line 16, leave Lines 13-15 blank.

Table with columns for 'If Line 12 is \$10,000 or less', 'If Line 12 is over \$10,000 - \$40,000', and 'If Line 12 is over \$40,000'. Rows include amounts from Line 12, tax rates, subtractors, and total payments (Lines 13-19).

Table for lines 20-23. Line 20: Amount of overpayment \$123456789.00. Line 21: Amount to be applied to 2008 tax \$123456789.00. Line 22: Refund \$123456789.00. Line 23: Amount you owe \$123456789.00.

Signature Under penalties of law, I declare that I have examined this return and, to the best of my knowledge, it is correct. Declaration of paid preparer is based on all information available to the preparer.

Signature and Date lines for fiduciary and preparer. Paid preparer's address, City, State, and Zip Code fields.

Additional documentation

You must file a copy of the will or trust agreement and a statement showing the tax liability of each of the following: the estate or trust, the beneficiaries and the grantor. Do not attach these documents unless the will or trust agreement has been amended.

Mark X if you filed these documents in a previous year Date filed (MMYY) Year of return (YYYY)
Send your signed and completed original return to: Office of Tax and Revenue, PO Box 441, Washington DC 20044-0441